

01-11-05

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

IFK  
X

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

|  |  |                        |                   |
|--|--|------------------------|-------------------|
|  |  | Application Number     | 10/710,739        |
|  |  | Filing Date            | July 30, 2004     |
|  |  | First Named Inventor   | Loring Johnson    |
|  |  | Art Unit               | 3677              |
|  |  | Examiner Name          | Jackson, Andre L. |
| Total Number of Pages in This Submission |  | Attorney Docket Number | 006979-001258     |

### ENCLOSURES (check all that apply)

|  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form                     | <input type="checkbox"/> Drawing(s)   | <input type="checkbox"/> After Allowance Communication to Group  |
| <input checked="" type="checkbox"/> Fee Attached                             | <input type="checkbox"/> Licensing-related Papers                                       | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  |
| <input checked="" type="checkbox"/> Amendment / Reply                        | <input type="checkbox"/> Petition   | <input type="checkbox"/> Appeal Communication to Group ( <i>Appeal Notice, Brief, Reply Brief</i> )  |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition to Convert to a Provisional Application               | <input type="checkbox"/> Proprietary Information   |
| <input type="checkbox"/> Affidavits/declaration(s)                           | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Status Letter   |
| <input checked="" type="checkbox"/> Extension of Time Request                | <input type="checkbox"/> Terminal Disclaimer  | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br><b>Express Mail Certificate; and Acknowledgment Postcard.</b> |
| <input type="checkbox"/> Express Abandonment Request                         | <input type="checkbox"/> Request for Refund   |  |
| <input type="checkbox"/> Information Disclosure Statement                    | <input type="checkbox"/> CD, Number of CD(s) _____                                      |  |
| <input type="checkbox"/> Certified Copy of Priority Documents                | <input type="checkbox"/> Landscape Table on CD  |  |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application   |   |  |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |   |  |

Remarks

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|              |                        |          |        |
|--------------|------------------------|----------|--------|
| Firm Name    | MOORE & VAN ALLEN PLLC |          |        |
| Signature    |                        |          |        |
| Printed Name | MICHAEL G. JOHNSTON    |          |        |
| Date         | 1-10-2004              | Reg. No. | 38,194 |

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

|                       |  |      |  |
|-----------------------|--|------|--|
| Signature             |  |      |  |
| Typed or printed name |  | Date |  |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



Effective on 12/08/2004

Fees pursuant to the Consolidated Appropriations Act 2005 (H.R. 4818)

# FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** \$120.00

## *Complete if Known*

|                      |                   |
|----------------------|-------------------|
| Application Number   | 10/710,739        |
| Filing Date          | July 30, 2004     |
| First Named Inventor | Loring Johnson    |
| Examiner Name        | Jackson, Andre L. |

Art unit 3677

Attorney Docket No. 006979-001258

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 13-4365 Deposit Account Name: Moore & Van Allen PLLC  
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

|  |   |
|--|---|
| <input type="checkbox"/> Charge fee(s) indicated below   | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input type="checkbox"/> Credit any overpayments                                  |

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES |              | SEARCH FEES |              | EXAMINATION FEES |              | Fees Paid (\$) |
|------------------|-------------|--------------|-------------|--------------|------------------|--------------|----------------|
|                  | Fee(\$)     | Small Entity | Fee(\$)     | Small Entity | Fee(\$)          | Small Entity |                |
| Utility          | 300         | 150          | 500         | 250          | 200              | 100          |                |
| Design           | 200         | 100          | 100         | 50           | 130              | 65           |                |
| Plant            | 200         | 300          | 300         | 150          | 160              | 80           |                |
| Reissue          | 300         | 500          | 500         | 250          | 600              | 300          |                |
| Provisional      | 200         | 100          | 0           | 0            | 0                | 0            |                |

### 2. EXCESS CLAIM FEES

#### Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

**Small Entity**  
**Fee(\$)**      **Fee(\$)**

50                  25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200                  100

Multiple dependent claims

360                  180

#### Total Claims

Extra Claims      Fee (\$)      Fee Paid (\$)

#### Multiple Dependent Claims

Fee (\$)      Fee Paid (\$)

- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20

#### Indep. Claims

Extra Claims      Fee (\$)      Fee Paid (\$)

- 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)

for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

|                     |                     |   |                 |                      |
|---------------------|---------------------|---|-----------------|----------------------|
| <b>Total Sheets</b> | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> | <b>Fee (\$)</b> | <b>Fee Paid (\$)</b> |
| - 100 =             | /50 =               | (round up to a whole number) x                          | =               |                      |

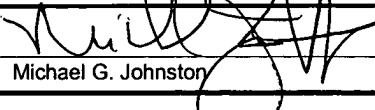
### 4. OTHER FEES

Non-English Specifications, \$130 fee (no small entity discount)

Other: 1 Month Extension of Time

\$120.00

## SUBMITTED BY

|                   |   |   |                        |
|-------------------|---|---|------------------------|
| Signature         |  | Registration No. 38,194<br>(Attorney/Agent) | Telephone 919-286-8000 |
| Name (Print/Type) | Michael G. Johnston   |   | Date                   |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



### EXPRESS MAIL CERTIFICATE

EXPRESS MAIL LABEL NUMBER: EV 638968930 US

Date of Deposit: 1-10-06

First Named Inventor: Loring Johnson

For: DOOR CLOSER

I hereby certify that the following documents:

1. Transmittal Form (PTO/SB/21);
2. Fee Transmittal Form (PTO/SB/17);
3. Check in the Amount of \$120.00;
4. Extension of Time (PTO/SB/ 22);
5. Amendment (3 Pages);
6. Express Mail Certificate; and
7. Acknowledgement Postcard.

are being deposited in a single envelope with the United States Postal Services "Express Mail" service under 37 C.F.R. 1.10 on the date indicated above and such envelope is addressed to:  
Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Brian Coley  
(Name of Person Mailing Documents)

  
(Signature of Person Mailing Documents)